STATE PLAN & POLICIES MANUAL

CHAPTER 4

4.0 LOCAL PROGRAM OPERATIONS

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4-1 LOCAL AGENCY STAFFING

Policy Number: 4-1 Effective/Revised Date: August 1, 2003

Chris Fogelman, Manager

Purpose

To ensure that each local agency (LA) employ or contract with adequate staff to ensure participants receive high-quality nutrition services while maintaining the required staff to participant ratio of 300:1 (300 participants to 1 Full-Time Equivalent (FTE).

Authority

7 CFR part 246.7

Policy

Each LA is required to have a WIC Director and adequate Competent Professional Authority (CPA) staff to serve their participant numbers. Employing or contracting the services of a Registered Dietitian (RD) for high-risk participants is also required. (Employing/contracting an RD is a requirement effective October 1, 2005.)

Guidelines

I. WIC Director

A WIC Director is responsible for overseeing the administrative aspects of the WIC Program. Typical responsibilities include fiscal management, program planning, staff supervision and serving as a contract liaison.

II. Registered Dietitian

A Registered Dietitian (RD) is responsible for providing nutrition assessment and education to high-risk participants who, at certification or follow-up visits, are determined to require more indepth nutrition intervention (Refer to Policy #5-13). An RD, licensed as a Nutritionist in Montana, also approves special formula requests.

III. Competent Professional Authority

A Competent Professional Authority (CPA) is responsible for the determination of participant nutritional eligibility for the WIC Program, the development of a participant's nutrition care plan and the assignment of food prescriptions. A CPA provides breastfeeding and general nutrition education to individual participants and small groups. Other responsibilities include promoting and supporting breastfeeding, providing program outreach and making referrals to community services. Non-RD CPA's refer participants requiring more in-depth nutrition intervention to the RD. The educational background required for an individual to serve as a CPA is outlined in Policy #4-2.

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4-1, Local Agency Staffing, continued

IV. Nutrition Aide

A Nutrition Aide, Program Specialist, Nutrition Assistant or similar job title is responsible for a variety of duties dependent upon the LA. Typical job duties include gathering demographic information; screening and determining categorical, residential and financial eligibility; gathering height, weight and biochemical information; issuing food instruments; scheduling appointments; making referrals to community services; promoting and supporting breastfeeding; performing general clerical duties and providing program outreach.

Per the Clinical Laboratory Improvement Act (CLIA) regulations, staff performing biochemical tests must possess a high-school diploma or the equivalent.

Nutrition Aides may provide direct nutrition services to individual participants and small groups after completing the appropriate Competency Based Training modules and under the supervision of a CPA (refer to Policy #4-5). This includes the screening of dietary information, the provision of low-risk nutrition education and the provision of breastfeeding education.

V. Local Training Coordinator

Each LA shall designate a Local Training Coordinator. This individual is responsible for overseeing the training of WIC staff including the Computer Training, New Employee Orientation, WIC Competency Based Training modules and continuing education (refer to Policy #4-3).

VI. Breastfeeding Coordinator

Each LA shall designate a Breastfeeding Coordinator. This individual shall be trained to promote and support breastfeeding (refer to Policy #7-2).

VII. Retailer Coordinator

Each LA shall select a staff member to act as the Retailer Coordinator. This position is the primary local contact for WIC Authorized Retailers. They will be responsible for store visits, annual training and corrective participant and retailer training (refer to Chapter 4-A-49).

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4-2 LOCAL AGENCY CPA REQUIREMENTS

Policy Number: 4-2 Effective/Revised Date: October 1, 2005

Chris Fogelman, Manager

Purpose

To ensure that qualified professionals are making decisions about WIC eligibility and benefits, each local agency (LA) must have on staff or on contract at least one person meeting the requirements to serve as a WIC Competent Professional Authority (CPA).

Authority

7 CFR part 246.7

Policy

LA's must have sufficient CPA hours provided based on LA participation. The CPA is responsible for certifying nutritional risk conditions, providing nutrition and breastfeeding education and prescribing supplemental foods.

Guidelines

I. Qualifications

LA CPA's shall be one of the following:

Registered Dietitian (RD);

Nutritionist with a Bachelor's or Master's degree from any college/university which is accredited/approved by the Commission on Accreditation for Dietetics Education;

Diet Technician, Registered (DTR);

Other degreed professionals with 12 or more semester credit hours in food and nutrition appropriate to the WIC population (including courses in Basic Nutrition, Nutrition in the Life Cycle and at least one other upper-level nutrition class) and successful completion of an Anatomy/Physiology series of coursework. Nutrition and Anatomy/Physiology coursework must have been completed within the past 10 years, unless the applicant has been working in the Nutrition field; or

Current Montana WIC CPA as of the effective date of this policy.

STATE PLAN & POLICIES MANUAL

4-2 LOCAL AGENCY CPA REQUIREMENTS, continued

Procedure

- A. Registered Dietitian and Registered Diet Technician CPA's must provide appropriate registration and/or licensure information to the LA.
- B. To verify completion of the necessary degree, Nutritionist CPA's shall provide transcripts to the LA prior to hiring.
- C. The LA shall submit transcripts to the State Agency (SA) for review and approval prior to hiring an "Other degreed professional" CPA.
- D. LA's with only one CPA shall develop a written contingency plan for CPA coverage during vacations, illness or other extended leave. This plan shall be submitted annually with the LA application.
- E. All CPA's shall successfully complete the Computer System Training per Policy #4-4.
- F. All CPA's shall attend New Employee Orientation and successfully complete the Competency Based Training modules according to Policy #4-5 and successfully attain the minimum hours of continuing education per year according to Policy #4-7.
- G. All CPA's must complete a minimum of five certifications quarterly to be able to continue to serve as a CPA.

STATE PLAN & POLICIES MANUAL

4-3 LOCAL TRAINING COORDINATOR

Policy Number: <u>4-3</u> Effective/Revised Date: August 1, 2003

Chris Fogelman, Manager

Purpose

Ensure all WIC Programs have standardized staff training.

Authority

7 CFR part 246.7

Policy

Each local agency (LA) shall designate a coordinator to oversee local agency staff training. The local training coordinator (LTC) is responsible for ensuring timely completion of all necessary training for WIC staff including the WIC Computer Training, the WIC New Employee Orientation, the WIC Competency Based Training (CBT) modules and WIC continuing education.

Training information shall be kept on file at the local agency and information on completion of training sent to the State Agency (SA). The LTC is also responsible for conducting an annual assessment to identify areas of staff training needed.

Guidelines

Local Training Coordinator

- I. Each local agency shall select a local training coordinator and submit the coordinator's name to the SA at the time of selection.
- II. The training coordinator shall ensure that:
 - a. new local agency staff complete WIC Computer Training, New Employee Orientation and the Competency Based Training modules in a timely manner;
 - b. local agency staff receive required training prior to provision of WIC services with pre-requisite training;
 - c. local agency staff receive at least the minimum required WIC Continuing Education Credits annually;
 - d. appropriate and timely staff training is conducted for LA staff on pertinent WIC topics; and
 - e. staff training and education is documented and maintained for review during monitoring visits at the local agency and information on completion of training is sent to the State Office
- III. The training coordinator may assist in conducting an annual assessment to identify areas of staff training needs.

STATE PLAN & POLICIES MANUAL

4-3 LOCAL TRAINING COORDINATOR, continued

Guidelines, (continued)

IV. The training coordinator may communicate staff training needs to WIC SA personnel for future development of programs of benefit to LA.

WIC Computer Training

I. Local WIC Program staff must have successfully completed the Montana WIC Computer Training prior to accessing the WIC automated computer system.

WIC New Employee Orientation

I. The Montana WIC New Employee Orientation is conducted quarterly in Helena (or an alternate location as determined by the State Agency (SA)). New Employee Orientation must be attended within the first six months of WIC employment.

Competency Based Training

I. Competency Based training consists of a series of eight self-taught modules. Information for the time lines for their completion is found in Policy #4-5.

Continuing Education

I. In order to maintain a current update on issues pertinent to the WIC program, staff is required to obtain continuing education credits from approved sources annually. The number of credits staff must attain are based on hours working in WIC and are outlined in Policy #4-7.

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4-4 WIC COMPUTER SYSTEM TRAINING

Policy Number <u>4-4</u> Effective/Revised Date: August 1, 2003	_
Chris Fogelman, Manage	_ _

Purpose

To ensure all WIC Programs train new employees and/or volunteers in compliance with established Federal and DPHHS computer policies and procedures.

Authority

7 CFR part 246.7

Policy

All new employees must complete the WIC Computer Training on how to operate the automated system **prior** to utilizing the system. The Montana WIC Program operates from an automated computer system. Examples of operation are to intake participants, certify participants, input health updates and issue food instruments.

Procedures

- I. The Local Training Coordinator (LTC) must notify the State Agency (SA) of new employees and make arrangements for training materials to be sent:
 - a) Training Laptop;
 - b) Training Manual:
 - c) Training Packet

NOTE: The training laptops will be sent to local agencies (LA) on a first come, first serve basis depending upon availability. It is to your benefit to contact the SA as soon has you have hire a new employee.

II. New employees must complete Computer Training to acquire sufficient knowledge and skills necessary to provide competent participant care. The LTC and LA are responsible for providing guidance and help to the new employee during the training session.

STATE PLAN & POLICIES MANUAL

4-4 WIC COMPUTER SYSTEM TRAINING, continued

Procedures (continued)

- III. Once training is completed the LTC from the LA must:
 - a) Send the signed *Training Completion Signature Form* to the SA verifying the computer training was successfully completed;
 - b) Request a computer access log in number from the SA for the new employee. A'Non-DPHHS Employees System/File Access Request form will be provided and returned with required signature prior to granting access.
- IV. The LTC is responsible for returning the Training Laptop to the SA at the expense of the LA. Refer to the Shipping Instruction Sheet for further information.

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4-5 LOCAL AGENCY STAFF ORIENTATION AND TRAINING

Policy Number	4-5
Effective Date: August 1,	2003
-	
Chris Fogelman, Ma	nager

Purpose

All local agency (LA) staff shall attend New Employee Orientation and complete Competency Based Training (CBT) modules appropriate to their job positions.

Information on module completion shall be kept on file at the local agency for review. The Local Training Coordinator (LTC) shall submit documentation of completion of modules to the State Nutrition Coordinator.

Authority

7 CFR part 246.7

Policy

Procedures

- I. All new WIC staff shall attend a one-day WIC New Employee Orientation within six months of employment. Topics covered will include: Orientation to WIC, WIC History, Customer Service, Breastfeeding Promotion, Cross Cultural Counseling and Nutrition Education and Counseling.
- II. All WIC staff who provide direct services to participants shall successfully complete the WIC CBT modules on the following topics within six months of employment:
 - A. Introduction to WIC
 - B. Civil Rights
 - C. Breastfeeding Promotion and Support (At a minimum, complete task appropriate sections)
 - D. Basic Nutrition
- III. All WIC staff weighing and measuring participants and performing hematological testing shall successfully complete the Anthropometric module prior to performing these functions independently

STATE PLAN & POLICIES MANUAL

4-5 LOCAL AGENCY STAFF ORIENTATION AND TRAINING, continued

Procedures (continued)

- IV. All WIC staff performing dietary screening shall successfully complete the Basic Nutrition and Dietary Screening modules prior to performing a dietary screening. Dietary screening evaluated as part of the certification process may be evaluated by a non-CPA, but must be reviewed by a CPA.
- V. All WIC staff providing breastfeeding education shall successfully complete the Breastfeeding module prior to provision of breastfeeding education.
- VI. WIC aides shall complete other modules based on job responsibilities.
 - A. WIC aides may provide low-risk nutrition education upon successful completion of the modules listed below. The Local Training Coordinator (LTC) is responsible to oversee the content of the information provided.
 - 1. Basic Nutrition
 - 2. Pregnancy
 - 3. Infant Nutrition
 - 4. Toddler and Preschooler Nutrition
 - B. WIC aides may teach classes after successful completion of the Basic Nutrition module and the module specific to the topic of the class. Training must be provided prior to the teaching of the class by the LTC or designee
- VII. WIC CPA's shall successfully complete all modules listed above within the first six months of employment. WIC aides shall successfully complete all modules listed above within the first year of employment.
- VIII. Copies of module post tests and record of module completion shall be kept on file at the local agency for review. The LTC shall submit documentation of completion of modules to the State Nutrition Coordinator.

STATE PLAN & POLICIES MANUAL

4-6 TRACKING LOCAL AGENCY TRAINING

Policy Number 4-6
Effective Date: May 1, 2003
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Chris Fogelman, Manager

Purpose

The State Agency is required to have a process for assuring all staff in contracted WIC Programs are updated /trained on new policies/procedures as they are received.

Authority

Federal 2001 Management Evaluation Observation #6

Policy

It is the policy of the Montana WIC Program that contracted WIC Programs develop a system, according to their entity's policies, structure and size, to disseminate information sent by the State Office to all their staff in local, outlying and satellite clinics. Contracted WIC Programs also need to keep on file supporting documentation that training has occurred.

Procedures

I. Contracted WIC Programs will develop a form for all staff to sign and date as verification they have ready policy/procedure information received from the State Office.

These signed and dated forms will be kept on file for review during the monitoring visit.

STATE PLAN & POLICIES MANUAL

4-7 WIC CONTINUING EDUCATION PROGRAM

Policy Number_4-7 Effective Date: October 1, 1999
Chris Fogelman, Manager

Purpose

In order to promote and maintain a quality WIC Program, Local Program staff are required to obtain approved continuing education credits.

Authority

7CFR part 246.7

Policy

It is the policy of the Montana WIC Program that all Local WIC Program staff who provide direct WIC services to program participants must successfully attain the required hours of continuing education in one contract period (12 months) while employed or volunteering in WIC.

Procedures

Continuing Education Credit(s) must be requested by one of two methods, pre-event method or post-event method.

- I. <u>Pre-event Method:</u> This is the preferred method for approval of continuing education credits. The program planner for major State conferences which will be attended by many Montana WIC staff (Spring Meeting, MPHA, MDA) generally requests continuing education units for WIC in advance. Application by this method provides knowledge of what will count for CEU's prior to attending.
- A. Request the form or copy it from the current State Plan. (Form follows this policy.) Start well before the event; submit 3 months prior to the event, when possible.
- B. Complete the form with the requested information. Attach additional sheet if necessary to list session instructor(s), qualification(s) and objective(s).
- C. List the number of CEU hours requested. If credit for multiple sessions is being requested, break out by session.
- D. Attach the brochure or program information. The more complete the information provided, the easier it will be to make the determination.

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4-7 WIC CONTINUING EDUCATION PROGRAM, continued

Procedures (continued)

- E. Submit the request as soon as possible prior to the event. Submitting less than 3 months prior to the event may result in non-approval due to the short timeframe
- F. Call if you have questions about approval or to check on progress of the approval; the phone numbers are 1-800-433-4298 option 3 or 406-444-2841.
- II. <u>Post-event Method:</u> This method is appropriate when approval has not been obtained prior to the event.
 - A. Request the form or copy it from the current State Plan. (Form follows this policy.)
 - B. Complete the form with the requested information. Attach additional sheet if necessary to list session instructor(s), qualification(s), relationship and concept item(s).
 - C. List the number of CEU hours requested. If credit for multiple sessions is being requested, break out by session.
 - D. Attach the brochure or program information. The more complete the information provided the easier it will be to make the determination.
 - E. Submit the request within 90 days of attending the event. If you submit the request after 90 days, the request will be denied.
 - F. Be aware that approval of CEU's by this method requires each staff member requesting credit to discuss concepts learned and describe how these concepts will be applied on the WIC job.
 - G. Call if you have questions about approval or to check on progress of approval; the phone numbers are 1-800-433-4298 option 3 or 406-444-2841.
- A portion of an event may be approved for continuing education credit. (i.e. you plan to attend the Montana Perinatal Association Meeting).

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4-8 PROGRAM BENEFITS

	Policy Number	4-8
Effective	Date: October 1, 1	997
Chr	is Fogelman, Mana	agei

Purpose

To ensure WIC benefits are provided to eligible women, infants and children who reside in Montana.

Authority

DPHHS manages an annual WIC grant from the U.S. Department of Agriculture through state rules (ARM 16.26.101-402). Federal WIC regulations are published in 7 CFR 246. Public Law 95-627, the Child Nutrition Act of 1996 (as amended) authorizes WIC.

Policy

It is the policy of the Montana WIC Program to provide program benefits to eligible women, infants and children who reside in Montana.

Guidelines

- I. WIC Program benefits consist of:
 - A. Nutrition education and counseling to: Individuals in face to face meetings, or Groups of 2 or more persons.
 - B. Access to health care programs plus referral to other private and public health care providers like:

Private physicians, Local public health departments, or Other appropriate care givers.

C. Specific supplemental foods such as:

Iron-fortified cereals, Peanut butter/dried beans and peas, Milk, Eggs, and Vitamin C rich juices

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4-9 LOCAL PROGRAM POLICIES

	Policy Number	4-9
Effective D	ate: October 1, 1	997
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Chris	Fogelman, Mana	iger

Purpose

Local WIC programs are responsible to provide WIC services as specified in their contract with DPHHS/WIC. However, flexibility in daily program operations is necessary to most effectively utilize available funds. Local programs are encouraged to utilize written policies to assure that staff, participants and employers know how WIC will be implemented. State agency staff must review policies before implementation to assure that program regulations are not being violated and that local programs are protected against audit findings.

Authority

State Policy

Policy

It is the policy of the Montana WIC Program that WIC program policies developed by local programs for local WIC operations must be approved in advance by the State WIC Agency.

Guidelines

Local WIC program policies must be dated and signed by the local WIC program project director and contain the non-discrimination statement.

Note: The policy format is of the local agency's choosing.

Procedures

Prior Approval

I. Local WIC program policies must receive prior approval from the State agency.

Posting

II. It is strongly recommended that local policies be posted in a highly visible location in the WIC office, particularly if the policy affects participants.

A. Example: Policy statements about no-shows or appointments.

STATE PLAN & POLICIES MANUAL

4-10 NON-DISCRIMINATION STATEMENT

	Policy Number	4-10
Effective	Date: October 1,	1998
Ch	ris Fogelman, Mai	nager

Purpose

State agencies are required to implement a public notification program to inform participants and applicants, particularly minorities, of their rights and responsibilities, their protection against discrimination and the procedures for filing a complaint. Therefore, any materials that provide information about a federally funded program and the means of participation must contain the non-discrimination statement if they will be distributed for or by a State or local WIC program as a part of their public notification process.

Authority

7 CFR part 246.7

Policy

It is the policy of the Montana WIC Program that a statement of non-discrimination will be utilized on program documents.

Guidelines

This policy applies to brochures and any other literature, posters or visuals produced by a participating food retailer, a formula company or other interested party at their expense relating to program benefits and eligibility. Regardless of the intent, design or source of materials, if they convey messages concerning program benefits and eligibility, and are used by State and local programs to meet their required public notification requirement, the non-discrimination statement must be included.

I. Standard version:

A. "In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD.) USDA is an equal opportunity provider."

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4-10, NON-DISCRIMINATION STATEMENT, Continued

Guidelines (continued)

- II. Abbreviated version (to be used only when space is limited):
 - A. "This institution is an equal opportunity provider."
- III. Radio/Television Public Service Announcements:
 - A. "WIC is an equal opportunity Provider

Procedures

The following items require the non-discrimination statement. Note: When circumstances are ambiguous, we suggest that the decision to use the statement is prudent.

- I. Retailer posters which are developed by State and local programs and by formula companies.
- II. Media notices for food retailer and local WIC program solicitations.
- III. Newsletters, internal and inter-departmental, as well as those meant for participants and/or other outside agencies, particularly if the newsletters convey WIC benefits and participation requirements.
- IV. Outreach and referral materials which are sent to physicians, hospitals, social services and health care centers or to other professionals.
- V. Letters of invitation to participate in the public hearing process which are sent to organizations and other interested parties, and media announcements of the public hearings.
- VI. Notices of warning or adverse action to participants and applicants, local programs and food retailers, and employees or employment applicants.

Example: Notices of ineligibility or disqualification, and cards or letters for missed appointments for food instrument pick-up or subsequent certification.

STATE PLAN & POLICIES MANUAL

4-10, NON-DISCRIMINATION STATEMENT, continued

Procedures (continued)

The following items do not require the non-discrimination statement, but it is strongly recommended that it be included.

I. Notices of warning of adverse actions or fair hearing procedures.

Note: From a program standpoint, we strongly recommend that the statement be included because the notices serve as notice of condition to continued eligibility and convey the intent of fairness in the processing of the action.

II. Nutrition education materials such as posters and pamphlets.

Note: Nutrition education materials which are developed primarily for nutrition education, such as a poster on food preparation or a flip chart on the basic food groups (but do not discuss or describe program benefits or eligibility) do not need to have the statement included.

III. Participant's ID cards, fact sheets, participant food instrument folders, food lists for both participant's and food retailers, and other policy publications.

Note: The non-discrimination statement is not required on participant identification cards (ID), food instrument folders, or food lists for participants and food retailers unless these publications describe the WIC Program's participation requirements and benefits.

STATE PLAN & POLICIES MANUAL

4-11 CONFIDENTIALITY

	Policy Number	4-11
Effective	Date: October 1,	1999
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Chi	ris Fogelman, Ma	nager

Purpose

To ensure WIC programs recognize the inappropriate release of WIC information could potentially result in lawsuits against the State or local program by the applicant or participant who provided the confidential information to the WIC program. USDA/FNS may also take adverse action against the State or local program for failing to follow Federal program regulations, instructions and policy.

Authority

7 CFR part 246.7

Policy

It is the policy of the Montana WIC Program that disclosure of participant information, whether provided by the applicant or participant or observed by WIC staff, is limited to:

- Persons directly connected with the administration or enforcement of the Montana WIC program
 to include WIC staff and managers and administrators who are responsible for the ongoing
 conduct of program operations including verification of income eligibility and detection of dual
 participation. Excluded are operational personnel not certifying and/or serving WIC applicants
 and participants, as well as administrators who do not directly supervise WIC staff.
- Representatives of public organizations designated by the chief health officer which administers health or welfare programs that serve persons categorically eligible for the WIC program. The State WIC agency must enter into a written agreement with each specific program.
- The Comptroller General of the United States for audit and examination authorized by law.

Note: At the time of application, applicants and participants will be informed with whom information may be shared through the "CERTIFICATION FORM AND ELIGIBILITY STATEMENT". Applicants and participants do not have the option of declining to permit such information sharing if they wish to participate in the WIC program.

STATE PLAN & POLICIES MANUAL

4-11 CONFIDENTIALITY, continued

Guidelines

General

Each local agency (LA) is responsible for protecting the right to privacy of WIC applicants/ participants. Utmost care shall be taken to ensure WIC staff keep participant/applicant information confidential to the best of their abilities.

When contacting applicants/participants via the telephone or mail, LA staff shall first verify that permission has been given to contact the applicant/ participant at this location.

Necessary discussion of WIC applicants/participants between LA staff shall take place in private areas where the information cannot be overhead by other participants, staff from other programs or the general public.

Procedures

Physical Space

Whenever possible, the LA shall provide separate rooms or private spaces for gathering participant information (income, weight, etc.) and individual counseling. Because much of the screening process for WIC eligibility is considered sensitive in nature, privacy is critical. Participants may be reluctant to provide accurate information if they believe others may hear what they are saying.

Suspected or Known Child Abuse or Neglect

It is not the intent of this policy to prohibit or restrict the reporting of suspected or known child abuse or neglect. WIC staff must follow Montana State Law requiring the reporting of known or suspected child abuse or neglect

Release Forms

- I. Requests for applicants and participants to sign release forms shall be limited to:
 - A. Court requested information (subpoenas)
 - B. An applicant or participant request that information be sent to a third party or an organization (e.g., a doctor, insurance program, school nurse, job service, etc.)
- II. Facilitating referral to another program. <u>Signing such a release form may not be a condition</u> <u>of eligibility or participation</u>
- III. Local programs may not have participants sign open-ended release forms. Release forms should have a timeline of 6 months to one year. Such a practice of requesting open ended release forms could serve as a barrier to participation for a large number of people who are most in need of program benefits.

STATE PLAN & POLICIES MANUAL

4-11 CONFIDENTIALITY, continued

Procedures (continued)

Fax

Fax technology is a boon to the fast communication of information and enables patient care needs to be met more quickly. Use of the facsimile machine can also compromise the integrity of the medical record and lead to loss of patient confidentiality. The following guidelines apply to transferring patient information via telefacsimile.

- I. Fax users at both ends of the transaction must know the proper procedures for the handling of confidential materials.
- II. Fax only to and from machines located in secure or restricted access areas.
- III. Transmit patient data by fax only when the original document or mail delivered copies will not serve.
- IV. Fax patient health care data only when the information is to be used for a patient care encounter (not as a routine release of information to a third party).
- V. It might be appropriate to fax a release of information to a WIC office from which a participant transferred and did not get a VOC card.

Example: It is not appropriate to fax to a machine in another office, such as the County Health Officer's fax machine, unless a WIC staff person is waiting at the machine to receive the fax

Volunteers

It is the responsibility of the local WIC program to exercise discretion in screening and selecting capable volunteers who would have access to confidential information. If, in the opinion of the local WIC program, a potential volunteer does not appear to be a good candidate for keeping information confidential, there may be other activities that the person can perform that would not include access to participant information.

Once volunteers are selected, specific confidentiality requirements governing the WIC Program must be covered in the orientation of training of volunteers. Local programs shall ask volunteers to read and sign Policy 4-6. By reading and signing the form, the volunteer would agree to keep information confidential or forfeit the volunteer assignment. Such action would reinforce the volunteer the importance of maintaining confidential participant information.

Follow up training can be conducted periodically to remind volunteers, as well as paid staff, of the importance of maintaining the confidential nature of participant information

STATE PLAN & POLICIES MANUAL

4-11, CONFIDENTIALITY, continued

Procedures (continued)

Specific Situations

The situations described in the table below commonly occur.

Information Requests	Local Program Responsibility
Subpoena	A request for information which cannot be ignored.
	Failure to respond could potentially result in the State WIC Agency or Local WIC Program being found in contempt of court.
	Note: Contact your legal counsel in assessing each individual request in determining whether to release the information as requested or attempt to quash the subpoena.
Search warrant	Clinic staff should carefully review the search warrant and provide only the specific information requested in the search warrant and no other information.
	Failure to fully comply could result in the immediate incarceration of WIC staff.
	Note: Legal counsel should be alerted to the provision of information immediately afterwards, if such notification has not already been given.
Applicant or Participant request	A WIC applicant or participant may ask to see or copy her own record, or a parent or guardian may request access to, or a copy of, a child's or infant's record (assuming issues regarding custody or guardianship have been settled). Such persons have the right of access to all information provided by the applicant or participant. However, the local WIC program need not grant the participant or guardian access to any other information in the file or record, such as documentation of income provided by third parties or any information which serves as a staff assessment of the participants condition or behavior unless required by state law.

STATE PLAN & POLICIES MANUAL

4-12 PARTICIPANT RECORDS

Policy Number 4-12
Effective Date: October 1, 1997

Chris Fogelman, Manager

Purpose

To ensure accuracy and consistency between local agency WIC Programs.

Authority

State Policy

Policy

It is the policy of the Montana WIC Program that both an electronic and hard copy of each participant's WIC records will be maintained at each local program. The electronic and hard copy of the record should be a mirror image of each other (should match).

Guidelines

Electronic copy

The electronic copy is defined as the information collected and maintained by local programs utilizing the WIC automated system software on equipment provided by WIC

Hard copy

The hard copy is defined as information written or printed on paper and/or a form which is collected and maintained by local programs. It may include, but is not limited to, information printed from data maintained in the WIC automated system. The hard copy files should be kept in locked file cabinets at all times when WIC staff are absent from the office.

Confidentiality

WIC Participant records are medical records and consequently subject to confidentiality laws and rules. See Policy 4-11 for more information

STATE PLAN & POLICIES MANUAL

4-13 INTEGRATION OF WIC PROGRAM BENEFITS WITH HEALTH SERVICES

Policy Number 4-13
Effective Date: October 1, 1997

Chris Fogelman, Manager

Purpose

An intake procedure is an activity to collect information for purposes of program eligibility

Authority

7 CFR 246.26 (d), Selection of local agencies

Policy

It is the policy of the Montana WIC Program to lend administrative efficiency and participant convenience to the provision of WIC services by combining intake procedures with other health programs and services whenever possible.

Guidelines

Disclosure of participant information, whether provided by the applicant or participant or observed by WIC staff, is limited to representatives of public organizations designated by the chief health officer which administers health or welfare programs that serve persons categorically eligible for the WIC program. The State WIC agency must enter into a written agreement with each specific program.

Income verification, income computations and certification interviews constitute information sources.

Note: Screen Number WICPS202 in the WIC Automated System contains information suitable for sharing/combining with other program intake procedures.

STATE PLAN & POLICIES MANUAL

4-14 HEALTH WORKER VACCINATIONS

P	Policy Number	4-14
Effective Da	ate: October 1,	2000
Chris	Fogelman, Ma	nager

Purpose

All local WIC program staff are encouraged to have current immunizations, particularly for Rubella and measles.

In the majority of daily WIC activities, conscientious adherence to the universal precautions for handling blood and body fluids will be adequate protection against contracting disease. However, the incidence of disease appears to be on the rise and in some cases vaccinations are appropriate.

Authority

FNS part 246.7 and State Policy

Policy

It is the policy of the Montana WIC Program that local WIC program employees are considered health workers and immunizations needed to maintain worker health are allowable WIC expenses.

Guidelines

Hepatitis B

The cost of Hepatitis B vaccine remains high. In order to make the best use of available dollars, we will judge each case individually and on its own merits.

- I. Local WIC program expenditures for Hepatitis B vaccination(s) for local program personnel is allowable only under these circumstances:
 - A. If the WIC employee routinely draws blood samples for hematological testing regardless of his/her WIC job; and/or
 - B. If a WIC participant being served by the local WIC program is positively identified by laboratory test as being infectious with Hepatitis B

Procedures

Written Request Required

A written request for Hepatitis B vaccination(s) must be made, including appropriate documentation, to the State agency and approval in writing received before vaccine is purchased. If an agency has an exposure control plan that has been approved by Montana WIC, individual approval as positions are filled, is not necessary.

STATE PLAN & POLICIES MANUAL

4-15 IMMUNIZATION SCREENING AND REFERRALS

Policy Number Effective Date: August 15,	
Chris Fogelman, Ma	nager

Purpose

Low-income children are less likely to be immunized than their counterparts, placing them at high risk for potentially debilitating or deadly diseases.

Educating WIC participants and their families about the importance of immunizations and providing referrals to immunization services has been a part of WIC's efforts for many years

Authority

State Policy

Policy

It is the policy of the Montana WIC Program that local WIC program staff will refer any WIC participant who appears delinquent or not current for immunizations to their health care provider.

Procedures

- I. The parent or guardian of an infant or child applicant scheduling a certification or subsequent certification appointment will be asked to bring the immunization record. Advise the parent or guardian the immunization record will be used to assess immunization status only and is not required to complete the certification.
- II. After the certification is completed, the parent or guardian will be requested to sign a release of information specific to immunizations. An example of the specific immunization release of information form is found on the following page.
- III. A signed release of information, with the first box checked, will allow the WIC staff to send a copy of the infant's/child's immunization record and contact information to the local immunization program. If both boxes are checked, the immunization record will also be entered or updated in the Immunization Registry. The parent or guardian may choose to have the infant's/child's immunization record assessed without having it entered into the Immunization Registry. The Immunization Program will contact the parent or guardian regarding the results of the immunization review.
- IV. The parent or guardian may refuse to sign the release of information. In this instance, the Immunization Record would not be sent to the Immunization Program. The parent or guardian should be referred directly to the Immunization Program.
- V. A direct referral of the WIC participant to the Immunization Program does not require a release of information form.

STATE PLAN & POLICIES MANUAL

SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS AND CHILDREN (WIC)

RELEASE OF INFORMATION MONTANA STATE WIC PROGRAM

Each	section	must be comple	eted.				
I.	I authorize the release of information obtained by the WIC Program for						
II.	(Name of Participant) The information is to be released from:						
	Name of Facility:		Beaverhead County WIC Program				
	Address:		1260 South Atlantic				
	City, State, Zip		<u>Dillon MT 59725</u>				
	And is to be provided to:						
	Name of Person/Organization/facility:		ation/facility:	Beaverhead County Immunization Program			
	Addre	ss:		1260 South Atlantic			
	City, S	State, Zip		Dillon MT 59725			
III.	The in	The information to be released is from my WIC Chart and includes:					
	☐ Immunization Record and phone number or other contact information.						
IV.	I understand the information will be used to review the above named participant's immunization status and to inform me of the result.						
	In addition, by checking the box to the left, the information will be used to update the Immunization Registry which is open to other health care providers seeking to verify immuniz status of their patients or clients. The information may also be used for aggregate data reporting						
IV.	I understand that I may revoke this authorization in writing at any time, except to the extent that action has been taken in reliance on this authorization. If this authorization has not been revoked, it will terminate one year from the date of my signature.						
Guard		Authorized					
_		arent, Guardian_ Representative			(Date)		

This information is to be released for the purpose stated above and may not be used by the recipient for any other purpose.

Standards for eligibility and participation in the WIC Program are the same for everyone, regardless of race, color, national origin, age disability, or sex. If you feel you have been discriminated against, write immediately to the

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Secretary of Agriculture, Washington, D.C. 20250, and/or the Office of Civil Rights, USDA – Food and Consumer Services, 1244 Speer Boulevard, Room 903, Denver, Colorado 80204.

4-16 CASELOAD MANAGEMENT (Waiting Lists and Mid-Cert Terminations)

Policy Number 4-16
Effective Date: August 1, 2003

Chris Fogelman, Manager

Purpose

To ensure Local WIC programs serve the highest priority WIC participants when the maximum participation level has been reached.

Authority

FNS 246.7 & State Policy

Policy

The following priorities shall be applied by the Competent Professional Authority when vacancies occur after a local WIC program has reached its maximum participation level, in order to assure that those persons at greatest nutrition risk receive program benefits.

Procedures

Priority System

The State WIC Agency may set income priority levels within these six priority levels:

- I. <u>Priority I:</u> Pregnant women, breastfeeding women and infants at nutrition risk as demonstrated by hematological or anthropometric measurements, or other documented nutrition related medical conditions which demonstrate the person's need for supplemental foods.
- II. <u>Priority II:</u> Except those infants who qualify for Priority I, infants (up to 6 months of age) of WIC participants who participated during pregnancy, and infants (up to 6 months of age) born of women who were not WIC participants during pregnancy but whose medical records document that they were at nutrition risk during pregnancy due to nutrition conditions detectable by biochemical or anthropometric measurements or other documented nutrition related medical conditions which demonstrated the person's need for supplemental foods.
- III. <u>Priority III:</u> Children at nutrition risk as demonstrated by hematological or anthropometric measurements or other documented medical conditions which demonstrate the child's need for supplemental foods; postpartum teens pregnant at 17 years of age or under.
- IV. **Priority IV:** Pregnant women, breastfeeding women and infants at nutrition risk because of an inadequate dietary pattern, migrant status or homelessness.

STATE PLAN & POLICIES MANUAL

4-16 CASELOAD MANAGEMENT, continued

Procedures (continued)

- V. **Priority V:** Children at nutrition risk because of an inadequate dietary pattern, migrant status or homelessness.
- VI. Priority VI: Postpartum women at nutrition risk.

Waiting Lists

- I. The primary purpose of waiting lists is to maintain a pool of interested applicants from which highest priority people can be selected to actually participate when caseload slots become available. An important element of the system is to give benefits to those of greatest need.
- II. The procedures for waiting lists and screening should also be consonant with efficient and effective management practices and should not become a futile exercise in paperwork.

Waiting List Procedures

I. Notify the State WIC Agency if you are considering a waiting list as an option to resolve a caseload problem. The State WIC Agency must determine when waiting lists may be started.

Caseload Management (Waiting Lists and Mid-Cert Terminations)

If a waiting list is started, local programs must keep lists of interested persons who visit the WIC program when no funds are available to provide benefits or the maximum assigned caseload is reached.

- II. The waiting list must include the applicant's name, date placed on the waiting list, address or telephone number, and category. Individuals must be notified of their placement on a waiting list within 20 days of their initial contact with the clinic.
- III. Only those applicants with a reasonable expectation of receiving program benefits need to be placed on the waiting list.

For example, if there are enough applicants in the Priority I and II list to fill openings over the next few months, a Priority V applicant need not be placed on the waiting list **except:**

If the applicant insists on placement on the waiting list, the applicant must be processed. Fair Hearing Procedures can be initiated if an applicant's request for placement on the waiting list is denied.

STATE PLAN & POLICIES MANUAL

4-16 CASELOAD MANAGEMENT, continued

Procedures (continued)

IV. The waiting list should not be so restrictive that when openings occur for program benefits, no applicants are listed.

Waiting List Rankings

Applicants are ranked on the waiting list according to their Priority. (See Priority System label above.) Applicants with valid VOC (Verification of Certification) Cards will be placed at the top of waiting lists.

 Applicants must be completely screened, a determination of eligibility/ ineligibility made and a certification period established before being placed on the State Certification System waiting list

Only the applicants placed on the State certification waiting list will be used in the calculation of staffing/funding.

Applicants placed on a less formal waiting list after a brief screening to determine priority placement will not be used in the calculation of staffing/funding.

- II. Explain to the applicant why placement on the waiting list is necessary and of realistic possibilities of receiving benefits.
- III. Selective screening of applicants may be done if only a few of the Priority Groups are being listed. As in the example above, if only Priority I and II applicants are being listed to fill the limited openings, the screening on a Priority V may not need to be completed.

Applicants with referral information applicable to certification, may not be given preference over applicants without predetermined information.

If the waiting list is comprised of low priority individuals, then alternative criteria may be selected to further subdivide the group to determine greatest need within the Priority.

- IV. Applicants are removed from the waiting list in priority order. That is, Priority I's are all served before Priorities II, III, IV, V and VI.
 - Remember: Each certification is a separate entity. A previous certification does not guarantee continued participation if a higher priority applicant is on the waiting list.
- VI. When openings become available, applicants will be notified by telephone or mail following same local clinic procedures used when notifying participants of an upcoming or missed appointment.

STATE PLAN & POLICIES MANUAL

4-16 CASELOAD MANAGEMENT, continued

Procedures (continued)

VII. Waiting lists must be retained to be reviewed during the next monitoring visit reviewing certification procedures.

Mid-Certification Terminations

Mid-certification termination due to lack of food money:

- Under State direction, local programs may be required to reduce caseloads by terminating participants currently certified.
- II. The State WIC Agency will direct local programs as to which priorities must be terminated.

The procedure will begin with the lowest priority participants and continue up the priority ranks until the State caseload reaches a level which can be served.

A participant terminated mid-certification will be given a Notice of Ineligibility and a minimum of 15 days notice that program benefits will be discontinued. The 15 days notice will include the prescribed food package to cover the time period.

If it is necessary to terminate participants above a Priority IV, affirmative action ranking will be assessed within each subsequent priority group.

- III. No certifications can be performed while participants are being dropped.
 - IV. Participants terminated or refused certification shall be placed on a waiting list following procedures found in Waiting Lists, above.

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4-17 FOOD INSTRUMENT RECEIPT, SECURITY AND INVENTORY CONTROL

Policy Number 4-17
Effective Date: August 1, 2003

Chris Fogelman, Manager

Purpose

WIC Food Instruments must be kept secure at all times..

Authority

State Policy

Policy

The "WIC Food Instrument Document Allocation" Form (reference sample form) is to be filled out every time a local WIC clinic receives food instruments from the State Office or contract print distribution center and when transferring ranges of food instrument stock to and from satellites. The completed form is to be sent to the State Office no later than 5 days after receipt of the food instruments (or transfer of food instrument stock from one service site to another).

Procedures

Food Instrument Receipt

- I. Upon receipt of food instruments and when transferring ranges of food instrument stock to and from satellites, local WIC clinic staff will count boxes received and spot check boxes (particularly the last box, which may not be full) for accuracy in numbers listed on boxes by the printer. This is important, as printer errors have resulted in issuing food instruments out of sequence.
- II. Immediately update screen WICPS515 ("ENTER" new FI sequence ranges assigned to the clinic, and/or "EDIT" existing FI sequence ranges assigned that have been modified by new receipt or transfer of previously received inventory) in each clinic's automated system.
- III. From time to time, the State Office will send additional food instrument tracking and inventory verification forms to local agency Program Directors. These forms aid the State Office in establishing patterns of usage and will always be accompanied by "step-by-step" instructions for their completion.

STATE PLAN & POLICIES MANUAL

4-17 FOOD INSTRUMENT RECEIPT, continued

Procedures (continued)

Food Instrument Security and Inventory Control

I. <u>Keep all blank food instrument stock in a locked vault, filing cabinet or drawer</u>. Only authorized personnel may issue WIC food instruments.

One staff person in each clinic must be designated as "inventory control person." When possible, this function of accountability must be different from the person issuing food instruments. The inventory control person has responsibility to:

- A. Assure the safe keeping of the blank food instruments. Food instruments must be locked up when not in use; whether that is overnight, during the lunch hour or any other time staff are absent.
- II. Provide food instruments to other WIC staff who are authorized to issue them.

Food Instrument Destruction

When a clinic is instructed to destroy food instruments, follow these procedures:

- I. Witness the destruction of the food instrument stock by a local agency employee.
- II. Destruction by either incineration or shredding
- III. Complete the "WIC Food Instrument Disposal Form" (reference sample form) and send to the State Office within 5 days of the witnessed destruction of food instruments.
- **IV.** Update the Food Instrument Stock Range on the WIC computer to document the change in food instrument inventory

STATE PLAN & POLICIES MANUAL

WIC FOOD INSTRUMENT DISPOSAL FORM

We certify that on//20, we place Ranges:	hysically destroyed the following WIC Food Instrument					
Beginning Range	through Ending Range					
Beginning Range	through Ending Range					
Beginning Range	through Ending Range					
Beginning Range	through Ending Range					
The Food Instruments were destroyed by (check appropriate):						
1 SHREDDING						
2 INCINERATION						
3 OTHER (Please explain)						
REMEMBER: TWO WITNESSES ARE REQUIRED.						
Signature:	Signature:					
Title:	Title:					
WIC Program:	_					
Clinic:						
Date:						
Return this form WITHIN 5 DAYS of the witness	sed destruction to:					
MONTANA WIC PROGRAM						

MONTANA WIC PROGRAM
Department of Public Health and Human Services
Cogswell Building
P. O. Box 202951
Helena, MT 59620

STATE PLAN & POLICIES MANUAL

4-18 FORMS, PAMPHLETS AND SPECIAL ORDERS

	Policy Number 4-18
	Effective Date: August 1, 2003
	Chris Fogelman, Manager
urnose	

Purpose

To ensure Local Agencies are using standardized forms and pamphlets supplied by the State Office.

Authority

State Policy

Policy

Every six months (August and February) Local Agencies shall fill in and submit to the State Office the order form requesting a sufficient supply (to last six months) of the standardized WIC Administrative and Nutrition forms.

Procedure

Supplies should be reviewed and an order placed every 6 months. You should keep a 3-month supply on hand. Supplies will be sent to you with a copy of your order form.

WIC Order Form	WIC Fair Hearing Procedure
Certification Form and Eligibility Statement Non-	WIC Participant Fraud Form
Reservation or Reservation	
Participant's Responsibility Form reinstated 1/1/96) in	VOC Card (Verification of Certification)
English or Spanish	
Release of Information	WIC Ineligibility Notification Letter
Zero Income Statement	WIC ID Packet
Progress Notes	WIC Outreach Brochure
Women Care Plans and Goals	We're Looking for a Few Good Moms"
Infant/Child Care Plans and Goals	WIC Outreach Card (pink)
24-hour Recall and Diet History for Women (pregnant,	WIC Poster (to list hours, location)
breastfeeding, non-breastfeeding, post-partum (no live birth))	Poster "We Accept WIC Checks"
24-hour Recall and Diet History for Child 1-5	Civil Rights Poster
Infant Nutrition Questionnaire	Approved Foods List
24-hour Recall (Migrant Nutrition Form) Spanish	Approved Foods List for Retailers
Prenatal Weight Gain Grids	Participant Handbook
U - Underweight S - Standard	DPHHS Address Labels
O – Overweight	WIC Expenditure Report

STATE PLAN & POLICIES MANUAL

4-18 FORMS, PAMPHLETS AND SPECIAL ORDERS, continued

Procedures (continued)

Nutrition Education Materials

"The First Twelve Months	""Snacks for Tough Teeth"
Montana Food Guide Pyramid	"Weaning with Love Teaching Baby to Drink from a
- Toddlers	Cup."
- Preschoolers	
- Breastfeeding Moms	
- Healthy Pregnancy	
~ Healthy Pregnancy~ (teen)	
~Healthy Choices for Women~	
~ Healthy Choices for Women~	
(no baby)	

Breastfeeding Pamphlets, La Leche League

Broadtrodanig r ampinoto, La Lourio Loague	
Breastfeeding	Is Baby Getting Enough?
The Importance of Breastfeeding	Breastfeeding after a Cesarean Birth
Preparing to Breastfeed	When Babies Cry
Establishing Your Milk Supply	How to Handle a Nursing Strike
Storing Human Milk	The Diabetic Mother and Breastfeeding
Tips for Handling the Baby Blues	Nipple Confusion
Are Your Nipples Sore?	Care Plan for Mastitis
If Your Breasts Become Engorged	Breastfeeding a Baby with Down's Syndrome
Working and Breastfeeding	Babies and Children in the Hospital
Treating Thrush	Common Breastfeeding Myths
Tips for Rousing a Sleepy Newborn	Nursing a Baby with a Cleft Lip or Palate
Manual Expression of Breastmilk Marmet Technique	Persistent Diarrhea: Could it be Lactose Intolerance?
Baby's First Immunization	The Breastfeeding Father
Tips for Breastfeeding Twins	Breastfeeding and Sexuality
Breastfeeding Makes a Difference	Breastfeeding a Baby with Reflux

Breastfeeding Pamphlets, Noodle Soup

Breastreeding ramphicts, Noodie Coup	
Why should I Nurse My Baby? – booklet	Ten Ways to Relax While Breastfeeding
Is Baby Getting Enough?	How Long Should I Breastfeed?
The Gold Standard	Ten Tips on Hand Expressing Breastmilk
Is Breastfeeding Right for Me?	Ten Tips on Getting Started with Breastfeeding
Ten Tips on Breastfeeding After a C-Section	Ten Healthy Habits While Breastfeeding
Breastfeeding the Gift of Life	Ten Tips on How Dad Can Help
Ten Ways to Relax While Breastfeeding	

STATE PLAN & POLICIES MANUAL

4-18 FORMS, PAMPHLETS AND SPECIAL ORDERS, continued

Procedures (continued)

Ellyn Satter Handouts

Call prior to ordering to confirm availability. Materials in other languages are available at Local Programs with foreign speaking populations.

"Control of Feeding"	"How to Feed Your Baby"
"Breastfeeding Your Baby (0-3 mo)"	"Bottlefeeding Your Baby (0-3 mo)"
"What Foods Should You Give Your Baby (0-12 mo):	"What Should You Feed Your Baby (older)"
Starting Your Baby on Solid Foods (older)"	"How to Feed Your Baby Solids (older)"
"Solid Food Additions During Transition Period (older)"	"Weaning Your Baby (older)"
"How to Feed Your Toddler (child-T)"	"Easy Foods for Toddlers to Eat (child-T)"
"Feeding Children (child-T)"	"What a Meal Should Include (child-T)"
"Keeping Children from Choking (child-T)"	"How to Feed Your Preschooler (child-P)"
"What is a Good Eater (child-P)"	

Spanish Materials Available

Lactancia Materna (Breastfeeding – La Lache)	

Special Orders

If a local WIC program has developed a WIC program form or pamphlet which meets a special need, it must be sent to the State WIC Agency <u>for approval before it is put into use.</u>

STATE PLAN & POLICIES MANUAL

4-19 RECORDS MANAGEMENT

Policy Number 4-19
Effective Date: October 1, 2005
,
Chris Fogelman, Manager

Purpose

To ensure Local Agencies are following a standardized records retention procedure.

Authority

FNS 246.7 & State Policy

Policy

Local Agencies shall manage the records within their office in accordance with the procedures outlined below.

Procedures

Unless otherwise noted, records must be managed as follows:

Post-Automation Records

Record Name	For How Long	Confidentiality	Safekeeping Required?	Deadline for Submission to State WIC Agency
Certification Form and			•	
Eligibility Statement	3 years	Yes	Yes	N/
Family Folders	3 years	Yes	Yes	N/A
Participant Complaints	3 years	Yes	Yes	Notify as occur- Process within 30 days
Participant Fraud Form	3 years	Yes	Yes	When Reported
Food Instrument Stubs	3 years	Yes	Yes	N/A
Food Instruments	Until Used	No	Yes	N/A
Voided Food Instruments	3 years	Yes	Yes	N/A
Beginning of Day Reports	3 years	Yes	Yes	N/A
End of Day Reports	3 years	Yes	Yes	N/A
Tape Back-up Log Sheets	1 year	No	No	Upon Request
Retailer Complaint Form	3 years	Yes	Yes	When Reported
Contract Application/ Budget Request	3 years	No	No	April 30
Nutrition Education Plan	3 years	No	No	With annual contract application
Outreach and Referral Plan	3 years	No	No	With annual contract application
List of Homeless Facilities/ Institutions Meeting Criteria in Policy C-3	3 years	No	No	With annual contract application
CLIA Information (those under the State Agency's Certificate)	3 years	No	No	With annual contract application

STATE PLAN & POLICIES MANUAL

4-19 RECORDS MANAGEMENT, continued

Procedures (continued)

Post Automation Records, continued

Record Name	For How Long	Confidential	Safekeeping Reuired?	Deadline for Submission to State WIC Agency
Contracts with DHES/ DPHHS	3 years	No	No	Before June 30
Expenditure Reports (with supporting documentation)	Local, minimum 3 years	No	No	28 th of following month
Inventory Worksheet	3 years	No	No	When changes occur
SA Monitoring Reports	3 years	No	No	Respond within 60 days after report
Signature Cards	Until staff termination	No	Yes	Upon staff termination
WIC Agency Correspondence	3 years	No	No	N/A
Self-Monitoring Reports	3 years	No	No	N/A
L.P. Evaluation of S.A.	1 year`	No	No	March 1
General Program Complaints	3 years	Yes	Yes	When reported
VOC Cards	Until used	No	Yes	N/A
VOC Log	3 years	Yes	Yes	N/A
Signature/Initial List	3 years	No	Yes	At monitoring

Pre-Automation Records

Record Name	For How Long	Confidential	Safekeeping Reuired?	Deadline for Submission to State WIC Agency
Certification Forms (all forms used to certify each	3 years beyond the final			
participant)	termination date	Yes	Yes	N/A

Destruction of Records

Records deemed eligible for destruction per the above schedule, will be either shredded or incinerated.

If shredding or incineration is done by someone other than WIC personnel, the destruction needs to be witnessed by WIC personnel.

STATE PLAN & POLICIES MANUAL

4-20 LOCAL PROGRAM RETAILER COORDINATOR

	Policy Number 4-20 Effective Date: October 1, 2005
***************************************	Chris Fogelman, Manager

Purpose

To ensure Local Agencies have a coordinator on staff who is the primary contact for both the State Office and local Retailers.

Authority

FNS 246.7 & State Policy

Policy

Each local agency shall select a staff member to act as the Local Program Retailer Coordinator. This person may serve as the retailer coordinator for all sites within the contracting agency, or for one specific site.

While the retailer coordinator will be the primary contact, they need not be the only local program contact. This will be determined by local program policy.

The local agency must notify the Administrative and Retailer Unit of the Montana WIC Program whenever the coordinator changes. This will ensure information is getting to the correct person in the shortest time possible.

Procedures

Coordinator Training

Training of the local program retailer coordinator will be conducted by the State Administrative and Retailer Unit at, preferably, the annual WIC meetings or at regional MAWA meetings. Information to be covered in the training includes:

Retailer Training

- 1. Why train WIC retailers
- 2. Training materials
- 3. "WIC" message
- 4. Contact with retailers
- 5. New retailers
- 6. Current retailers
- 7. Annual training
- 8. Dealing with store complaints
- 9. Dealing with participant complaints

In-Store Visits

- 1. Initial Store Visits
- 2. Educational Buys
- 3. Monitoring Visits

STATE PLAN & POLICIES MANUAL

4-20 LOCAL PROGRAM RETAILER COORDINATOR, continued

Procedures (continued)

Potential Retailers

It is the responsibility of the local program retailer coordinator to contact new grocery, dairy, or pharmacy businesses in their service area to offer participation in WIC. Topics to be discussed should include:

A brief description of the WIC Program

The difference between WIC and the Food Stamp Program

How WIC affects the local community

How WIC purchases could affect their sales

If the prospective retailer is interested, the local agency coordinator should refer the retailer to the State WIC Program for an application packet and further information.

Educational Buys

Upon written request of the State Administrative and Retailer Unit and receipt of the pertinent documents, the local program retailer coordinator will do educational buys at specified WIC retailers. The coordinator must file a written report of the educational buy with the State Administrative and Retailer Unit within 60 (sixty) days of the date of request.

The purpose of the educational buy will be to determine what problems may exist at retailers, or to verify complaints filed by WIC participants. The results of the educational buy will be discussed immediately after the purchase with the store manager or owner.

Retailer Training

Upon written request of the State Administrative and Retailer Unit and receipt of the pertinent documents, the local program retailer coordinator will hold routine annual training sessions for the local area authorized retailers. This training will be held in conjuncture with contract renewals. Attendance at the training will be mandatory for at least one representative from each individual retailer. The appearance of a single representative from a chain or group of retailers will not meet the requirements of the WIC retailer contract.

STATE PLAN & POLICIES MANUAL

4-20 LOCAL PROGRAM RETAILER COORDINATOR, continued

Procedures (continued)

Initial Retailer Visit

An initial visit will be made to prospective WIC retail grocery stores to ensure the required variety of authorized foods are available, and to verify prices. This visit will be made by the local program retailer coordinator upon written request of the State Administrative and Retailer Unit. The coordinator will schedule an appointment with the owner/manager of the retail store to discuss more detailed aspects of the WIC Program. An in-store walk-through will be made to complete an inventory of authorized WIC foods already in stock. The report must be signed by both the WIC representative and the store owner/manager. This initial visit must be made and documented before the grocery store may be authorized as a retailer.

Retailer Complaints

It is the responsibility of the local program retailer coordinator to respond to either written or verbal complaints from authorized retailers concerning potential or actual program abuse by WIC participants.

The complaint and the resulting actions must be documented in the participant's file, with a copy sent to the State Administrative and Retailer Unit.

Participant Complaints

It is the responsibility of the local program retailer coordinator to investigate either written or verbal complaints made by WIC participants concerning activities at authorized WIC retailers. The coordinator should contact the retailer owner/manager to discuss the complaint. The results of the conversation must be documented.

A separate complaint file must be maintained of all complaints received by the local program retailer coordinator and the action taken. Copies of the complaints and action should be forwarded to the State Administrative and Retailer Unit. This file will be reviewed by the State's monitoring teams.

STATE PLAN & POLICIES MANUAL

4-21 REPORTS

Policy Numb	oer	4-21
Effective Date: Octobe	r 1,	2005
Chris Fogelman,	Mai	nager

Purpose

To ensure all Local Agencies submit their Participation by Category Reports in a timely manner.

Authority

State Policy

Policy

Monthly Participation by Priority and Category reports are required to be submitted to the State Agency by the 30th of the following month (i.e., October report should be received November 30th, etc.).

Guidelines

Monthly Participation Reports

This report is used to collect an average participation figure by clinic. This average participation figure is used to determine the following years funding formula calculations (April 2004 – March 2005 participation figures are used to fund FY2006).

STATE PLAN & POLICIES MANUAL

4-22 OUTREACH/REFERRAL

Policy Number	4-22
Effective Date: October 1,	2005
Chris Fogelman, Ma	nager

Purpose

Coordinated, integrated, "user-friendly" service delivery systems are the key to universal access to care for all pregnant women and children.

Administrative, physical and systematic barriers exist and prevent women and children from obtaining the health and social services they need. Lack of coordination and integration of related services also are barriers.

An effective strategy for removing the barriers by linking services to one another and connecting the resulting system with women and children, is "one-stop-shopping."

Authority

State Policy

Policy

All Local Agencies shall develop and use an outreach/referral system designed for their communities.

Procedures

The Local Program is responsible for the following outreach/referral efforts:

- Send press releases and public service announcements to local media at least once annually.
 The annual press release must include information with regard to participation in WIC by homeless individuals and organizations and agencies serving the homeless.
- 2. Keep on file documented efforts of outreach and referral for review by the State monitoring team.
- Distribute materials to local physicians, dietitians, nurses and other community agencies. Local
 programs will provide a list of locations and telephone numbers of their clinic sites, along with
 income guidelines, categoric eligibility criteria and nutrition risk criteria for referral of participants
 to WIC, as well as information on the WIC program.
- 4. Provide written information to WIC participants about the Food Stamp Program, TANF, Medicaid, CHIP and Child Support Payment Enforcement Program on at least one occasion.
- 5. Conduct an annual "recruit a friend" effort with WIC participants. If at maximum caseload, efforts could be targeted towards pregnant women and infants.

STATE PLAN & POLICIES MANUAL

4-22 OUTREACH/REFERRAL, continued

Procedures (continued)

- 6. Submit a current "Outreach/Referral Plan" to the State WIC Agency with the Annual Application.
- 7. Encourage local programs to participate in local HM/HB Coalitions. Local program CPAs are responsible for visiting CACFP participating centers/homes in the joint CACFP/WIC Breastfeeding Project. Reports of breastfeeding activities and statistical breastfeeding information are submitted by the local programs for the statewide WIC Newsletter.
- 8. The Breastfeeding Promotion and Support Plan for WIC in Montana sets the standards for local programs to establish networking links within the community and to promote valid and consistent breastfeeding information.
- 9. An example of what to include in the Breastfeeding Promotion and Support Plan for WIC in Montana is attached in this section.
- 10. Work with community agencies to coordinate WIC clinic hours, nutrition education programs, locations and/or medical or nutrition screening when serving the same population.
- 11. Make concerted efforts to reach migrant farmworker and homeless populations.
- 12. Attempts will be made in areas where there are non-reservation or landless Native Americans to inform them of the WIC Program directly and/or through agencies that have contact with them.

Referral Coordination

1. Each local WIC program must identify their referral network in their outreach referral plan which is submitted annually to the State WIC Agency.

Note: See **Policy on Administrative Policies** for methods by which WIC services should be coordinated with existing health and social service agency programs.

Contacts with Specific Groups

- 1. **General Public:** Local WIC programs have access to public service announcements, brochures, posters, etc. available from the State WIC Agency for use in their outreach campaigns.
- 2. <u>FCH Programs specific to Early Pregnancy Intervention:</u> Coordinate and collaborate with the Montana Perinatal Program and the Baby Your Baby Program.
- 3. <u>Retailers:</u> Local programs are encouraged to involve food retailers in nutrition information demonstrations or campaigns.

Note: See Chapter 3 - State Agency Operations, Outreach/Referral, for specific groups contacted by the local agency in coordination with the State Agency.

STATE PLAN & POLICIES MANUAL

4-23 OUTREACH/REFERRAL PLAN

	Policy Number	4-23
Effective	Date: October 1,	2005
Chri	is Fogelman. Ma	nagei

Purpose

The primary function of outreach is to increase the visibility of the WIC Program in order to promote greater program participation among high risk individuals. An annual plan for conducting outreach is a tool for sound program management.

Authority

State Policy

Policy

Written information on Food Stamps, TANF, Medicaid and Child Support Payment Enforcement Program will be provided to each applicant.

Referral is also an integral part of WIC. WIC serves as an adjunct to health care, making extensive use of referrals to community resources to work towards meeting the needs of the WIC participant. Referral to smoking cessation, substance abuse counseling/treatment, domestic violence prevention, and breastfeeding support programs is essential in order to meet the nutrition education objectives of the Montana WIC Program.

In addition, each local WIC Program shall refer each applicant not currently claiming participation in Medicaid to the Medicaid Program. If an applicant is denied WIC benefits, a referral will be made to other food assistance programs available in the service area.

Procedures

Outreach Referral Plan

A local outreach/referral plan enables local WIC program staff to make plans that are specific to their particular community. The plan is an opportunity for local programs to assess community resources, WIC's relationship to these resources and what can be done to improve relations with the agencies in order to improve services to the WIC population.

STATE PLAN & POLICIES MANUAL

4-23 OUTREACH/REFERRAL PLAN, continued

Procedures (continued)

The purpose of the Outreach/Referral Plan is to develop a working document that will effectively help WIC empower its participants to access needed health services. Aggressive outreach efforts that address the "who, what, where, why and how" of prenatal, child and family health services, help bridge the gap between programs and the families who need them.

The Outreach/Referral Plan must incorporate the Breastfeeding Promotion and Support Plan for WIC in Montana for the local community (see Chapter 7).

Contents of the Plan

The Outreach/Referral Plan will consist of:

- 1. A description of a problem you have identified n your community that you will attempt to resolve. The identification of a problem can be made with the assistance of information from:
 - a. the WIC automated system, both at the local and State level;
 - b. from other community resources, such as MIAMI project statistics, IHS statistics and county statistics.
- 2. A written plan which describes the follow-up of high-risk participants.
- 3. Referral options of high-risk participants for those local programs without a licensed nutritionist on staff.
- 4. A written plan of how you can collaborate with existing community resources and strengthen the alliance with WIC.
- 5. A written assessment of community resources maintained and used by the local WIC clinic.
- A list of local resources for substance abuse counseling and treatment which will be available for distribution.
- 7. Narrative description of prior activities and current plan for outreach to high risk groups including migrant farmworkers, landless Native Americans, women in the early months of pregnancy and substance abusers and their infants.

Submission of the Outreach/Referral Plan to the State WIC Agency is required on an annual basis. The plan shall be submitted with the annual application form.

Objectives of an Outreach/Referral Plan

Improve health professionals and the public's awareness of WIC benefits.

Improve collaboration and cooperation between other health service programs and WIC for enhanced health benefits and cost effectiveness.

Address the special needs of the homeless, migrants, Native American Indians and other minority groups.

STATE PLAN & POLICIES MANUAL

4-23 OUTREACH/REFERRAL PLAN, continued

Procedures (continued)

Assessment

Assessment of Community resources should include:

The telephone directory, library and Chamber of Commerce are a few sources of information. Public and private agencies, programs and services may include those listed on the following pages.

Determine WIC's relationship to each resource identified. The Community Agencies Assessment Sheet at the end of this section will help to evaluate whether:

- 1. services are available:
- 2. WIC has a working agreement or letter of understanding with the WIC agency;
- 3. a contact person at the agency is known;
- 4. WIC refers potential participants to the agency;
- 5. WIC received referrals from the agency;
- 6. WIC has a plan for follow-up and feedback; and
- 7. there is no integration with WIC at present.

Community Resources (City or City County Management by Mayor, Manager or Commissioners)

Services

911	Emergency Medical	Fire
Police	Sheriff	Coroner
DARE	County Extension/EFNEP	Animal Control
Transportation	Child Protection Team	Preventive Community Programs, ie.,
		Summer Jobs for Kids Program

Human Resources

Housing	Head Start	Education – Schools, Job Training
Winterization Program	Foster Grandparents	Big Brother/Big Sister
Handicapped	Fuel Assistance	School Lunch/Breakfast

Social Services

Food Bank	Al/AlAnon	Alcohol/Crug Treatment Centers
Battered Women's Shelter	Women in Transition	Mental Health Center
Support Groups		
Salvation Army	Goodwill	St. Vincent de Paul
Rescue Missions	Florence Crittenton Home	Young Families
Catholic Charities (includes	Lutheran Social Services (includes	Shodair Adoptive Services
Adoptive Services)	Adoptive Services)	
Credit Counseling		

Recreational

Swimming Baseball Etc.

STATE PLAN & POLICIES MANUAL

4-23 OUTREACH/REFERRAL PLAN, continued

Procedures (continued)

Community Resources, continued

Organizations/Service Clubs

Red Cross	March of Dimes	Heart Association
Lung Association	Diabetes Association	Infant/Child Care Centers
After-School Programs	Service Organizations (Altrusa; Soroptimists; Rotarians; Knights of Columbus; Lions;	
	Shriners; YMCA	

Public Health Agency

Local County or City-County	Aid for Dependent Children (TANF)	Wel-Child Clinics
Health Department		
KIDS COUNT (EPSDT)	Parenting Classes or Groups	Support Classes or Groups
STD testing/counseling	AIDS testing/counseling	Childbirth Preparation Classes
Lamaze	Home Visits (High Risk Follow-Up)	Targeted Case Management
Breastfeeding Education,	Healthy Mothers, Healthy Babies	Teen Pregnancy Classes; Groups
Training, Support, Classes,	Coalition	
Hot Line		
Social Services	Dental	Environmental, Sanitation Services

Resources for Native Americans

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Clinic	l Housing	l Social Services
I CILLIC	i i iousiiiu	i Social Services

Private Health Resources

Hospital(s)

Maternity Services	Outpatient Services	Well Child Clinics
Immunizations	Dental	KIDS COUNT
Target Case Management	Day Care	Bereavement, Infant Loss, Hospice
Hot Lines	Community Health Education	CPR Training
Early Infant Intervention	Breastfeeding Support, Training,	Outreach (linked with local WIC Program)
Program	Management (linked with local WIC	,
	Program)	
Smoking Cessation Programs	Substance Abuse Prevention Programs	

Medical Clinic(s)

Medicaid	KIDS COUNT (EPSDT)	Immunization
Outreach (linked with local WIC Program	Targeted Case Management	Specialties (Pediatricians, Allergists, etc.)
Family Planning	CHIP	

Free-Standing Clinic(s)

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	Satellites	Shopping Malls	Neighborhood Clinics
	School-based Clinics		

Rehabilitative Clinics or Centers that offer Specific Health Services

Occupational Therapy	Physical Therapy	Speech Therapy
Nutrition Services	Adolescent Psychiatric	